

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/552831

FILING DATE

107 SEP 2006

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2			1			
3	6		1			
4	6		1			
5	6		1			
6	6		1			
7	6		1			
8	1		1			
9			1			
10	6		1			
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47						
48						
49						
50						
TOTAL IND.	2		2			
TOTAL DEP.	8	←	8	←	←	
TOTAL CLAIMS	10		10			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.			↓			
TOTAL DEP.		←		←	←	←
TOTAL CLAIMS						